

WASHINGTON STATE WIC POLICY AND PROCEDURE MANUAL



VOLUME 1, CHAPTER 15

Breastfeeding



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POLICY: Promote and Support Breastfeeding as the Normal Method of Infant Feeding

Staff shall promote and support breastfeeding as the normal method of infant feeding.

The Washington State WIC Nutrition Program encourages all pregnant women to fully breastfeed for the first six months of life, unless medically contraindicated, and continue to breastfeed for at least the first year of life and thereafter, for as long as mutually desired by mother and child.

PROCEDURE:

Clinic staff:

- A. Utilize educational and promotional methods which portray breastfeeding as the normal method of infant feeding.
 - 1. Consistently promote breastfeeding as the normal method of infant feeding. Mention breastfeeding first in all written and verbal communication when educating clients and others about infant feeding.
 - 2. Inform each pregnant client about the following:
 - a. WIC does not provide infant formula to breastfed infants during the first month of life because early introduction of infant formula has a negative effect on breastfeeding success.
 - b. How to initiate and sustain full breastfeeding using a client-centered approach.
 - c. WIC staff will provide breastfeeding support and encouragement to address breastfeeding concerns. See the “Breastfeeding Review Counseling Session” policy in this chapter.
 - d. Local breastfeeding support services that are available to her.
 - 3. Assure each breastfeeding client receives client-centered services and information that addresses her unique needs and/or questions about breastfeeding.
 - 4. Use positive and culturally appropriate breastfeeding messages in all educational programs and materials designed for staff, clients and outreach.
- B. Use no infant formula manufacturer client educational materials, promotional items, displays or logos, or any other formula manufacturer materials.

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1. Eliminate materials with pictures of baby bottles that are not provided by the state WIC office and those supplied by formula manufacturers.
 2. Prohibit staff use of infant formula manufacturer promotional items.
 3. Store formula, baby bottles, nipples, or other formula feeding items out of view of clients.
- C. Create a comfortable environment for women who choose to breastfeed in the clinic. Options may include:
1. Provide furniture (foot stools and chairs with arms) that allow women to breastfeed comfortably.
 2. Provide waiting room materials (newsletters, children's books, etc.) that promote breastfeeding.
 3. Provide private space for clients to breastfeed and/or pump when a client prefers not to breastfeed in public.

Note: WIC agencies may take further steps to create an environment that supports and promotes breastfeeding as the norm. Below are additional actions the clinic coordinator and the Breastfeeding Promotion Coordinator, working with administration may want to consider:

1. Display pictures of WIC staff breastfeeding their children. Clients like to see WIC staff following the advice they provide.
2. Place signs in the waiting area that encourage clients to breastfeed in the WIC area anytime. Breastfeeding women may have been told or believe they cannot breastfeed in public. Signs in the waiting area allow clients to see that the WIC clinic is a safe place to breastfeed.
3. Display pictures of WIC staff trained to help clients successfully breastfeed. Clients need to know who they can talk to about breastfeeding.
4. Post positive messages about breastfeeding at each workstation. Positive messages let clients know that WIC supports breastfeeding.
5. Display pictures of clients with their stories about what breastfeeding means to them. Reports indicate that clients respond positively to pictures of their breastfeeding peers.

RECOMMENDATION: Breastfeeding-Friendly Workplace

Local WIC Agencies are encouraged to develop breastfeeding-friendly workplace policies for their own WIC staff.

GUIDELINES:

The clinic coordinator and the Breastfeeding Promotion Coordinator work with agency administration to:

- A. Develop policies and practices that create a breastfeeding-friendly workplace. These policies and practices may include the following provisions:
 - 1. A private, convenient, clean and comfortable area for staff to express their breast milk.
 - 2. Breastfeeding policies and other resources to support breastfeeding staff.
 - 3. Providing breastfeeding support to staff.
 - 4. Provisions to allow breastfeeding infants to accompany their mothers to work.

Information:

WIC staff who successfully breastfeed their own children can serve as role models on how to continue to breastfeed while working.

POLICY: Breastfeeding Promotion Coordinator

The clinic coordinator shall designate a Breastfeeding Promotion Coordinator. The Breastfeeding Promotion Coordinator shall work with the clinic coordinator to ensure that local agency breastfeeding policies are developed and followed.

The Breastfeeding Promotion Coordinator shall coordinate breastfeeding promotion and support activities for the local agency and with community partners.

For more information about the role and the qualifications of local agency Breastfeeding Promotion Coordinators, refer to Volume 2, Chapter 14 – Staffing.

PROCEDURE:

The Breastfeeding Promotion Coordinator:

- A. Assists in the development of local agency breastfeeding policies and procedures.
- B. Assists in the development of activities to improve clinic breastfeeding promotion and support as part of the Annual Nutrition Education Plan.
- C. Oversees planning, implementation, evaluation and training of breastfeeding activities.
- D. Coordinates breastfeeding promotion and support activities with local agency health promotion efforts and community partners.
- E. Keeps current with breastfeeding knowledge and research.

RECOMMENDATION: ***Identifying Breastfeeding Promotion and Support as a Core Job Responsibility***

Clinic coordinators are encouraged to work with agency administration to identify breastfeeding promotion and support as a core job responsibility for all positions.

GUIDELINES:

The clinic coordinator:

- A. Develops a goal statement regarding the agency's commitment to promote and support breastfeeding and shares this statement with candidates during job interviews.
- B. Develops interview questions to assess a job candidate's experience, training and attitudes towards breastfeeding.
- C. Includes roles and responsibilities that address breastfeeding promotion and support in staff job descriptions. See Appendix A for "Examples of Appropriate Roles Related to Promoting and Supporting Breastfeeding."
- D. Incorporates breastfeeding training goals into annual performance evaluations.

POLICY: Orienting New Staff on Breastfeeding Promotion and Support

All new WIC staff shall receive orientation on breastfeeding promotion and support.

PROCEDURE:

The clinic coordinator:

- A. Ensures new staff receive breastfeeding orientation which includes, at a minimum, the following:
 - 1. Review of state and local agency breastfeeding promotion and support policies.
 - 2. Review of policies and procedures for issuing appropriate food packages to breastfed infants. Refer to WIC Manual, Volume 1, Chapter 23 – WIC Foods.
 - 3. Review of role appropriate duties and responsibilities related to promoting and supporting breastfeeding. See Appendix A of this chapter for examples.
 - 4. Information on community breastfeeding services and referral criteria.
 - 5. Education and training on:
 - a. Normal breastfeeding.
 - b. Maintaining milk production.
 - c. The negative impact that formula supplementation has on breast milk production.
 - d. The limited circumstances when a woman should not breastfeed and what actions to take when serving these clients.
 - 6. Review of local agency breastfeeding promotion objectives and activities outlined in the Annual Nutrition Education Plan.

Information:

Orientation of all new staff to policies and goals provides a foundation of knowledge from which they can project a positive attitude about breastfeeding. Training ensures staff have the knowledge necessary to help clients make informed infant feeding decisions.

POLICY: The Breastfeeding Review Counseling Session

Staff shall not routinely issue formula to breastfeeding infants.

The Competent Professional Authority (CPA) shall prescribe initial and any subsequent changes to food packages issued to breastfeeding women and infants.

A breastfeeding woman requesting any change to her infant's food package to add or increase the amount of formula shall receive a complete Breastfeeding Review by a CPA trained in breastfeeding support. A Breastfeeding Review is not required when a woman requests less formula.

The CPA shall educate and counsel the breastfeeding woman on the negative effect formula supplementation has on breast milk production.

The CPA shall assess the situation and issue the minimal amount of formula, if needed, to reduce the negative effect that formula supplementation has on breast milk production. When a CPA is not available to do the Breastfeeding Review and assign the food package, staff shall not be allowed to issue formula, or increase the amount of formula given to the infant.

Powder formula shall be recommended when issuing formula to breastfeeding infants.

Documentation that the Breastfeeding Review was completed shall be recorded on the Notes tab of either the breastfeeding woman's chart or the infant's chart in Client Services.

PROCEDURE:

The CPA:

- A. Establishes rapport with the client using techniques such as:
 - 1. Starting with introductions, greeting the client by name, and informing the client of the reason for the discussion.
 - 2. Using engaging and appropriate body language that respects the client's culture.
 - 3. Using a non-judgmental, helpful approach to engage the client when discussing how she is feeding her infant and what her plans are for continued breastfeeding.
 - 4. Asking open-ended questions to find out why the client is requesting formula.
 - 5. Using active listening skills.

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- B. Affirms the client's feelings or concerns.
- C. Engages the client in the discussion while offering support and encouraging continued breastfeeding.
 - 1. Allow the client to share thoughts; avoid dominating the conversation.
 - 2. Acknowledge the client's feelings and concerns and target education to the client's needs; avoid providing unneeded information.
 - 3. Discuss the contents of any breastfeeding materials provided to the client. Focus on the client's concerns and questions; avoid simply providing handouts without discussing the contents.
 - 4. Ask for the client's feedback on the usefulness of the information.
- D. Determines the amount of formula to issue, if any.
- E. Encourages the client to continue breastfeeding, even if formula is issued.
- F. Refers the client for further breastfeeding follow-up if needed.
- G. Documents the Breastfeeding Review on the Notes tab of the woman's or infant's file in Client Services. Title the note Breastfeeding Review. Documentation of the review includes:
 - 1. The problem or concern.
 - 2. The intervention – what was discussed, what you did to help, etc.
 - 3. Whether or not formula was issued.
 - 4. Other important information as needed.
- H. The Breastfeeding Review fulfills the Second Contact requirement when done in person by staff.
- I. If there is no CPA trained in breastfeeding support:
 - 1. Affirm the mom's concerns and explain that staff who can determine which food package to issue are not available.
 - 2. Encourage the mom to continue breastfeeding and inform her that adding formula to her infant's diet may decrease her ability to make milk.

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3. Offer support to the client within your skill level.
4. Schedule the client as soon as possible for a time when the CPA is available to do a Breastfeeding Review or refer to community resources to complete the Breastfeeding Review, if available.
5. Document any pertinent information for CPA follow-up.

Note: Staff may also offer the following options:

1. Have a CPA call the client as soon as possible to offer support by phone.
2. Suggest that the client use any formula samples that she may have received from other sources or purchase it with Basic Food Benefits or cash.

Information:

Because each client's breastfeeding experiences and challenges are unique, it is critical that staff have adequate training, knowledge and resources to address her concerns and help her to meet her breastfeeding goals.

Some of the most common breastfeeding concerns include:

1. Sore nipples
2. Perceived low milk production
3. Engorgement
4. Working and breastfeeding

The breastfeeding books listed below are currently in clinics or may be ordered from the Department of Printing General Store for staff and/or clients to help provide information and address breastfeeding problems and concerns.

Breastfeeding: Keep It Simple – Amy Spangler (client handout and staff resource)

Breastfeeding Triage Tool- Seattle King County Public Health (staff resource)

The Breastfeeding Answer Book- La Leche League (staff resource)

The Breastfeeding Coalition of Washington (BCW) has breastfeeding information on their web site at: <http://www.breastfeedingwa.org/>

For links from the BCW web site to other web sites that offer breastfeeding information for staff and clients go to: <http://www.breastfeedingwa.org/organizations>

For free downloadable information on working and breastfeeding from the BCW web site go to: <http://www.breastfeedingwa.org/working>

POLICY: Providing Staff with Continued Breastfeeding Education and Training

Staff who provide direct client services shall receive training on role appropriate breastfeeding promotion and support at least twice per year.

Staff shall have access to resources and information to enhance their knowledge and skills to promote breastfeeding, to answer breastfeeding related questions, and to support clients to fully-breastfeed.

PROCEDURE:

The clinic coordinator, working with the Breastfeeding Promotion Coordinator:

- A. Ensures all CPAs have access to training and current information in order to acquire the knowledge and skills to:
 - 1. Provide all pregnant clients culturally appropriate, client-centered services and information on how to successfully initiate and sustain full breastfeeding.
 - 2. Provide all breastfeeding clients culturally appropriate, client-centered services and information that address her unique needs and/or questions about breastfeeding.
 - 3. Perform a complete Breastfeeding Review prior to issuing formula to a breastfeeding infant. Refer to the policy on the Breastfeeding Review in this chapter.
 - 4. Appropriately utilize breastfeeding education materials.
 - 5. Distribute breastfeeding equipment according to state and local policies and demonstrate their appropriate use.
- B. Ensures clerks have access to training and information in order to:
 - 1. Answer basic breastfeeding questions.
 - 2. Appropriately refer clients if breastfeeding support is needed.

Information:

Training ensures staff have the knowledge necessary to help clients make informed infant feeding decisions. Opportunities for ongoing training are necessary because information about breastfeeding continues to change. Participation in breastfeeding training is essential to successful implementation of breastfeeding promotion programs.

Semi-annual staff training and education on breastfeeding may be provided through clinic in-services, attendance at local or state sponsored trainings, self-study, or other breastfeeding education opportunities.

POLICY: Assuring Access to Breastfeeding Promotion and Support during the Prenatal and Postpartum Periods

A written plan to assure client access to breastfeeding promotion and support during the prenatal and postpartum periods shall be included as part of the Annual Nutrition Education Plan.

PROCEDURE:

The clinic coordinator, working with the Breastfeeding Promotion Coordinator:

- A. Assures that a written breastfeeding promotion plan is incorporated into the Annual Nutrition Education Plan and submits the plan to the state WIC office. For more information about the plan's requirements, refer to written guidance provided each year by the state office and Volume 2, Chapter 11 - Nutrition Education Plan.
 - 1. Shares the plan with staff.
- B. Develops a written breastfeeding promotion policy which, at a minimum:
 - 1. Promotes breastfeeding as the normal method of infant feeding.
 - 2. Supports the American Academy of Pediatrics recommendation of fully breastfeeding for the first six months of life, unless medically contraindicated, with continued breastfeeding for at least the first year of life and thereafter, for as long as mutually desired by the mother and child.
 - 3. Orients new staff to clinic procedures on breastfeeding promotion and support.
 - 4. Instructs staff to discuss:
 - a. Breastfeeding with all pregnant clients as part of the basic contact.
 - b. Breastfeeding with all pregnant and breastfeeding clients at all WIC appointments.
 - 5. Ensures every breastfeeding client receives a Breastfeeding Review prior to issuing formula to her breastfeeding infant.
 - 6. Provides culturally appropriate, client-centered breastfeeding education to ensure clients make informed infant feeding decisions.
 - 7. Assures staff receives on-going breastfeeding training.

POLICY: Distributing Breast Pumps

Local agencies shall have the option to provide breast pumps to breastfeeding clients as breastfeeding aids based on need and availability.

Local agencies choosing to provide breast pumps as breastfeeding aids shall develop policies for their distribution and submit a copy of these policies and procedures to the state WIC Breastfeeding Promotion Coordinator or designee upon completion.

Breast pump policies shall specify that:

1. Pregnant women shall not be provided with breast pumps as incentives to breastfeed.
2. Pumps shall only be loaned or given to current WIC clients.
3. Termination of a client's eligibility shall cancel the loan agreement for a multi-user breast pump and require its immediate return.
4. Staff members who are WIC participants in need of breast pumps shall have another staff member issue pumps to them.
5. Issuance of WIC checks shall not be withheld because of a client's failure to return a multi-user breast pump, or in lieu of, or to off-set a client's financial responsibility for a damaged or lost breast pump.
6. Manual breast pumps, personal use electric pumps and pump kits shall not be returned and reissued to other clients.
7. Clients shall not be required to pay a deposit for the use of a multi-user electric breast pump.
8. Staff shall not collect copies of clients' Social Security Cards or record Social Security numbers as part of the breast pump distribution process.

Local agencies have the option to count breast pump education that occurs subsequent to and separate from the certification visit as the breastfeeding client's second nutrition education contact.

Note: It is recommended that if the client has medical reasons that would make her eligible for a breast pump through Medicaid, staff should refer her Medicaid provider, such as a physician or qualified lactation consultant, to obtain an electric breast pump.

PROCEDURE:

The clinic coordinator, working with the Breastfeeding Promotion Coordinator:

A. Develops local agency policies to include:

1. The requirements listed in this policy and the rest of this section.
2. Training requirements for staff authorized to issue breast pumps. Refer to the policy, “Staff Authorized to Issue Breast Pumps” in this chapter.
3. Criteria for evaluating a client’s need for a breast pump and identifying which type of breast pump a client is eligible to receive based on the table “Criteria for Issuing Breast Pumps” in this chapter.
4. Identification of situations when breastfeeding clients need additional follow-up, support and/or referrals.
5. The requirement to document in Client Services in the notes field of the client’s record the type of pump provided, staff initials and for multi-user pumps, the date the pump is due back
6. Instructions for storing breast pumps. Electric breast pumps should be kept in an area that is locked and not easily accessible to others.
7. Inventory procedures for tracking multi-user electric breast pumps and personal use electric pumps. See “Tracking Inventory of Electric Breast Pumps” in this chapter.
8. Instructions related to the protection of information collected from clients and documented on Breast Pump Release of Liability forms, including copies of drivers’ licenses and drivers’ license numbers.

Note: Staff have the option to copy drivers’ licenses and to document drivers’ license numbers. If the local agency chooses this option, the local agency develops a written policy regarding when copies of client identification are to be kept on file and how the client’s information is to be protected.

- B. Uses an agency-approved release of liability form to ensure clients fully understand their rights and responsibilities when receiving a manual or electric breast pump. A sample release of liability form is provided in Appendix A of this chapter.
- C. Reviews, as needed, local agency breast pump loan policies and procedures with all WIC staff, MSS staff, or others who are authorized to issue breast pumps. Document the review as part of the clinic’s in-service training record.

Information:

Written policies promote consistency in education, counseling and documentation among all WIC staff and help to reduce agency liability.

POLICY: Contracting with a Third Party to Provide WIC Breast Pumps

Local agencies have the option to subcontract with a third party, such as a hospital pharmacy or private lactation consultant to loan or provide breast pumps provided by WIC to WIC clients.

WIC employees shall not be affiliated with the third party with whom the agency has a subcontract/interagency agreement for this service.

Local agencies shall have a subcontract/interagency agreement with the perspective third party that specifies the responsibilities of each party to meet the breast pump policy requirements in this chapter.

PROCEDURE:

The clinic coordinator:

- A. Designates a staff person to be the point of contact for the state WIC office when subcontracting with a third party, such as a hospital pharmacy or private lactation consultant to loan or provide WIC breast pumps to current WIC clients who are breastfeeding.
- B. Has in place a subcontract/interagency agreement that specifies the responsibilities of each party ensuring:
 - 1. Pumps are distributed according to the policies “Distributing Breast Pumps” and “Staff Authorized to Issue Breast Pumps” in this chapter.
 - 2. Record keeping meets local agency standards.

POLICY: Staff Authorized to Issue Breast Pumps

The WIC coordinator shall work with the Breastfeeding Promotion Coordinator to authorize and train local agency WIC staff to issue breast pumps to clients.

Staff authorized to issue breast pumps to clients are required to do so according to the procedures listed below.

PROCEDURE:

Staff authorized to issue any type of breast pump:

- A. Are trained in local agency breast pump distribution policies and how breast pumps work.

Note: Local agencies may request training on how breast pumps work from Medela's regional sales representative. Contact information for this person may be obtained from the state WIC office.

- B. Review the table "Criteria for Issuing Breast Pumps" in this chapter to evaluate if the client needs a pump and if so, which pump the client is eligible to receive and will meet her needs.
- C. Make sure all components of the pump are present and the pump is in working order prior to issuing it to the client. See Appendix A for information on how to evaluate the pressure (suction) of breast pumps.
- D. Demonstrate to the client how to use the pump following manufacture's instructions. Provide the client with appropriate written instructions, and in appropriate languages as needed.
- E. Cover key education messages on:
1. Keeping the pump clean.
 2. Manually expressing breast milk.
 3. Maintaining milk supply.
 4. Storing breast milk safely.
- F. Encourage the client to ask questions and provide answers to questions.
- G. Complete an agency-approved Release of Liability form, review the contents of the form with the client and ask the client to sign the form if she understands and agrees to the terms of the agreement prior to issuing the breast pump.

- H. Provide the client with a copy of the signed Release of Liability Form. Keep a copy on file for four years.
- I. Provide clinic contact information in case the client has questions about the use of the pump. This may be in the form of the “Dear Breastfeeding Mom” letter in the Appendix A of this chapter. Clinics have the option to revise this letter as needed.
- J. Document in Client Services in the notes section of client’s record the type of pump provided, staff initials, and for multi-user pumps, the date the pump is due back.
- K. Contact the client to assess if further guidance is necessary. Refer client for additional breastfeeding support, if needed.
- L. When issuing a manual breast pump, take these additional steps:
 - 1. Inform the client that the manual breast pump and breast pump kit remains the client’s personal property and is designed for one person only. Sharing with other women may cause cross-contamination.
 - 2. A defective manual pump may be replaced at the local agency.
- M. When issuing a personal use electric breast pump, take these additional steps:
 - 1. Inform the client that the personal use electric pump shall remain the client’s personal property and is designed for one person only. Sharing with other women may cause cross-contamination and void the pump’s warranty.
 - 2. Inform the client that a lost personal use electric breast pump shall not be replaced. A stolen pump may be replaced with a copy of the police report, depending on availability of breast pumps, and if the client is still fully breastfeeding.
 - 3. A defective breast pump may be replaced at the local agency if the client is still fully breastfeeding and replacement pumps are available. Staff may contact the state WIC Breastfeeding Promotion Coordinator or designee to replace the breast pump, or for further guidance.
 - 4. Document in the notes section of the Transfer Card that a client received a personal use electric breast pump and the date it was issued when a client requests to transfer.
- N. When loaning a multi-user electric breast pump, take these additional steps:

1. Establish the length of the loan based on client need and clinic demand for multi-user electric breast pumps.
2. Inform the client that:
 - a. The pump and case are to be returned on the date indicated on the Release of Liability Form clean and in working condition.
 - b. A change of address or phone number needs to be reported to clinic staff.
3. Follow-up with the client at each clinic visit to assure that the pump is still being used for the purpose for which it was loaned.
4. Instruct the client to return the pump immediately under the following circumstances:
 - a. The pump becomes damaged, ineffective or is under a manufacturer recall.
 - b. The client is no longer using the pump.
 - c. The client is no longer receiving WIC services.
 - d. The client transfers to another agency.
 - e. The client chooses to cancel the loan agreement.

Note: The following procedures are recommended to aid tracking multi-user breast pumps:

1. Contact clients issued breast pumps within two business days for follow-up.
2. Issue checks monthly rather than bi- or tri-monthly.
3. Contact client monthly if issuing bi- or tri-monthly checks. This allows staff to provide frequent follow-up on breastfeeding issues and to recover the pump when it is no longer needed.
4. Limit the time of the loan. (i.e. do not loan multi-user breast pumps for a year at a time).
5. Document additional notes on the Flow Sheet and/or in the Demographics Special Needs field of the client's record to help identify clients who have been issued multi-user breast pumps.

Criteria for Issuing Breast Pumps

Type of pump	Criteria for Issuing Breast Pumps
Two-handed manual pump	<p>This pump is intended for clients who:</p> <ul style="list-style-type: none"> • Need a pump for a limited time only, i.e. engorgement, flat or inverted nipples. • Are experiencing occasional separations; i.e. date night, appointments. • Need a pump and no other pump is available.
One handed Manual pump (Harmony pump)	<p>This pump is intended for clients who:</p> <ul style="list-style-type: none"> • Are seeking employment. • Are facing on-going, short-term separations from their babies. • Are working or going to school part-time. • Do not have access to electricity when they need to pump. Two pumps may be issued for double pumping, if appropriate.
Multi-user Pump (Lactina pump)	<p>This pump is intended for clients who:</p> <ul style="list-style-type: none"> • Have premature or medically challenged infants. • Have infants who are unable to feed at the breast. • Cannot feed the infant at the breast because of medical reasons. • Are having problems with breastfeeding and cannot continue to provide breast milk without the use of a pump. • Are experiencing short-term separations for medical reasons. • Are returning to work or school within two weeks and will be separated from their babies a significant portion of the day* and the Harmony or WIC 'n Style is not available, or does not meet the clients' needs. • Do not meet the criteria for receiving a personal use electric breast pump. <p>Note: Clinics have the option to request documentation of employment and/or school schedules.</p>
Personal-use electric breast pump (WIC 'n Style pump)	<p>This pump is intended for clients who fully breastfeed their infants and:</p> <ul style="list-style-type: none"> • Have well established breast milk production. • Their infants are 8-12 weeks old. Staff trained in breastfeeding support may authorize issuance of this pump to clients of younger infants based on professional discretion. • Have no breastfeeding complications such as low weight gain, sore nipples, breast pain, etc. Thrush under treatment is allowable. A Lactina pump should be issued to clients with breastfeeding complications. • Are returning to work or school within two weeks and will be separated from their babies a significant portion of the day.*

* It is up to each individual clinic to develop guidelines which allow for professional discretion in evaluating the individual needs of a breastfeeding client who will be separated from her baby for work and/or school.

POLICY: Checking-in, Cleaning and Assessing the Performance of Multi-user Electric Breast Pumps

Multi-user electric pumps that have been loaned to clients shall be cleaned and assessed for performance at the time of check-in and prior to loaning the pump to another client.

PROCEDURE:

Clinic staff:

- A. Document the date of the pump return in Client Services in the notes tab of the client's record.
- B. Update any inventory logs, Release of Liability forms, and other clinic paperwork.
- C. Clean returned breast pumps and pump cases and inspect for pest infestation prior to loaning the pump to another client.
- D. Store the breast pump in a manner that keeps it clean and secure.
- E. Assess the pump's performance prior to issuing it to a client. See "Assessing the Effectiveness of Breast Pumps" Appendix A in this chapter for more information.
- F. Adhere to the following procedures when returned pumps and cases are suspected or reported to be infested with insects:
 - 1. Place the pump and case in a plastic bag, twist the top of the bag, and secure the closure. Tag the sealed bag with a date and let the bag stand closed for 2 – 3 days.
 - 2. Inspect the breast pump and case after the 2 – 3 days.
 - 3. If there is no evidence of insect infestation, follow normal procedures for cleaning the pump and case.
 - 4. If there is evidence of insect infestation, place a second plastic bag over the breast pump and return to Medela for cleaning.
 - a. Call Medela at 1-800-435-8316 ext. 248 to inform them of the infestation and obtain a Return Authorization Number (RAN). A RAN number is a customer service tracking number used by Medela.
 - b. Pack the double bagged pump in a box.

- c. Write the RAN number on the outside of the box along with the word “infested”.

Note: Do not use red bio-hazard bags to pack the pump; they are not required by Medela for insect infestation. These bags are more expensive and Medela charges additional fees to process a pump that has been packed in a red bio-hazard bag.

- d. Write a brief note with the following information to be included in the shipping box with the bagged pump and include:
- i. That the pump may be infested with insects and does not need refurbishing (which is more expensive).
 - ii. The name of the local agency.
 - iii. The local agency contact person’s name and telephone number.
 - iv. The physical address of where the pump is to be shipped once the pump is cleaned.

5. Send the pump with the above information to:

Medela, Inc.
Return # _____ Infested
1101 Corporate Drive
McHenry, IL 60050

Information:

Because electric breast pumps are taken into client homes, there is a risk of insect infestation, cockroaches in particular. Staff will follow the policy and procedures above to help prevent the spreading of insects into the clinic, hospital, or another client’s home.

Staff may use local breastfeeding funds to cover the cost associated with shipping, cleaning, and purchasing plastic bags or to cover the cost of pump maintenance and repair.

POLICY: Tracking Inventory of Electric Breast Pumps

Staff shall maintain an inventory of personal-use and electric breast pumps at each clinic site.

PROCEDURE:

Clinic staff:

- A. Complete the following steps for tracking the inventory of personal-use electric pumps:
 - 1. In an inventory log, record the date the pump was issued, who issued it, and the name of the client or Client Services I.D. number.
 - 2. Conduct an annual inventory of personal-use pumps and compare to the inventory log.
 - 3. Report any loss of inventory which may be due to theft to the state Breastfeeding Promotion Coordinator or her designee.
- B. Complete the following steps for tracking the inventory of multi-user electric pumps:
 - 1. In an inventory log, list all the serial numbers of multi-user electric breast pumps at that clinic.
 - 2. Write in indelible ink or etch the local agency's name and telephone number on the pump and the pump case.
 - 3. Record, at a minimum, the following information in the inventory log:
 - a. Date the breast pump is issued.
 - b. Date pump is due back to clinic.
 - c. Staff person who issued the breast pump.
 - d. Multi-user electric pump serial number.
 - e. Client's name and/or Client Services I.D. number.
 - f. Date the pump is returned to clinic.
 - g. Date multi-user electric pump and case are cleaned and disinfected, and inspected for insect infestation, and the initials of staff who performed these tasks.

4. Review the inventory on an annual basis to determine if there are overdue pumps that need to be returned.

Information:

Sample inventory logs for multi-user and personal-use pumps are located in Appendix A of this chapter. The sample personal-use pump inventory form is a perpetual inventory and allows clinics to continuously monitor the number of pumps in the clinic.

Clinics may want to inventory multi-user pumps more often than once a year if pumps are being issued by more than one person and/or if the clinic has a large number of multi-user pumps.

POLICY: In-state Transfer Clients and Recovery of Multi-Use Pumps

Staff shall request the return of a multi-user electric breast pumps before a client transfers WIC services to a different location within Washington.

If the client does not comply, or if the client transfers without notifying the previous clinic, staff at the client's previous clinic shall notify the client's new clinic about the unreturned multi-user electric breast pump.

Staff transferring in a client who has not returned a multi-user electric breast pump loaned to them by the previous clinic shall assist with continued breast pump recovery attempts. Recovered pumps are to be returned to the original clinic.

Staff shall contact the state WIC office immediately when they learn a client has transferred out of the clinic with a multi-user electric breast pump.

WIC checks, transfer documentation and/or services shall not be withheld from clients who fail to return multi-user electric breast pumps.

PROCEDURES:

Clinic staff:

- A. Request the return of the multi-user electric breast pumps when notified by the client of plans to transfer to another WIC clinic, or when notified by the client's previous clinic.
- B. Notify client that the pump must be returned to the clinic within 30 days to avoid being billed for the loss of the pump, as indicated in the terms of the Release of Liability form.
- C. Enter notes on the client's Transfer Card or call the client's next clinic to request their assistance with the recovery of an unreturned multi-user electric breast pump, or to notify staff about the issuance of a personal use electric breast pump.
- D. Document in Client Services on the notes tab of the client's record any communication entered on the Transfer Card, dialogue between staff, and conversations between staff and the client about the recovery attempt including notification provided to the client and/or the client's plans to return the pump.
- E. Return any recovered multi-user electric breast pumps to the original clinic from where it was loaned. Contact the state WIC office for assistance if needed.
- F. Contact the state WIC office immediately when noticing a client has electronically transferred out of the clinic with a multi-user electric breast pump. The state WIC office staff will assist in identifying the client's new clinic.

- G. If the pump is not recovered within 30 days of two attempted contacts with the client, file a Report of Lost, Stolen or Damaged Multi-user Breast Pumps. See “Lost or Stolen Multi-user Breast Pumps” this chapter.

POLICY: Lost or Stolen Multi-user Electric Breast Pumps

Staff shall attempt to recover a multi-user electric breast pump when a pump has not been returned by the date indicated on the Breast Pump Release of Liability Form before notifying the state WIC office. All recovery attempts shall be documented in Client Services. If recovery attempts are not successful, the state WIC office shall work with staff to attempt to recover the breast pump.

The state WIC office shall have the option to have clients reimburse the WIC program up to the replacement cost of a lost or damaged multi-user electric breast pump. The process of recouping funds shall be done by the state WIC office.

Staff shall contact the state WIC office immediately if they learn the client has transferred out-of-state without returning the pump.

According to federal regulations, WIC checks, transfer documentation and/or services shall not be withheld from clients who fail to return multi-user electric breast pumps.

PROCEDURE:

Clinic staff:

- A. Contact the client within 30 days after the pump was due to the WIC clinic to remind her to return the breast pump.

Note: A sample letter for contacting the client, titled “Over Due Pump Letter” can be found in Appendix A of this chapter.

- B. Document in Client Services in the notes section in the client’s record how the client was contacted (i.e. phone call, letter, etc.), staff name, the date the contact was made, when a second contact was attempted, and the results of any communication with the client.
- C. Contact the state WIC office immediately if staff learn that the client has transferred out-of-state without returning the pump. Document on the Flow Sheet of Client Services in the client’s record, or another location, that the client has transferred out-of-state with an electric multi-user breast pump.
1. For in-state transfers, refer to the policy, “In-state Transfer Clients and Breast Pump Recovery” in this chapter.
- D. Request the client file a police report and provide a copy of the police report to the clinic if a client reports a multi-user electric breast pump stolen. Staff shall assist the client in requesting a police report if needed. A copy of the police report shall be provided to the State Breastfeeding Promotion Coordinator or designee. A client shall not be held financially responsible for a stolen multi-user electric breast pump.

- E. Use the Report of Lost, Stolen or Damaged Multi-user Electric Breast Pumps located in Appendix A of this chapter to report missing multi-user electric breast pumps to the state WIC office within 30 days after two attempted contacts with the client when the pump has not been returned to the clinic. Document the following information on the report:
 - 1. Clinic contact person and e-mail address.
 - 2. Name of clinic, clinic address and phone number.
 - 3. The serial number of the lost or stolen multi-user electric pump.
 - 4. Indication of whether the multi-user electric pump was stolen or lost.
 - 5. Client name, ID number and contact information.
 - 6. A description of the events leading to the loss.
- F. Send a copy of the report to the state WIC office via email, fax or mail and keep a copy on file for 4 years.
- G. Update the clinic's inventory log to note that the pump has been reported lost or stolen.
- H. Notify the state WIC office immediately if the multi-user electric breast pump is returned after the report has been filed.
- I. Do not withhold checks, terminate or suspend a client for a lost, damaged or stolen multi-user electric breast pump.

POLICY: Damaged Multi-user Electric Breast Pumps

Staff shall contact Medela when a multi-user electric breast pump is damaged or not working properly and follow procedures below for the repair of the breast pump.

If the pump is not under warranty, staff shall have the option to use local agency breastfeeding funds to repair pumps and follow the same procedure below for repairing the pump. Replacement pump cases and straps may also be purchased using local agency breastfeeding funds.

Staff shall have the option to order a replacement pump if a defective breast pump is returned by a client to the local agency.

PROCEDURE:

Clinic staff:

- A. Contact Medela's customer service department at 1-800-435-8316, extension 248 when a multi-user electric breast pump is damaged to determine if the breast pump is under warranty.
- B. Determine if the multi-user electric breast pump is under warranty, and if so:
 1. Obtain a RAN number from Medela. An RAN number is a customer service tracking number used by Medela.
 2. Write a brief note with the following information to be included in the shipping box with the damaged pump:
 - a. The nature of the problem.
 - b. The name of the clinic.
 - c. The clinic contact person's name and telephone number.
 - d. The physical address of where the pump is to be shipped once repairs are made.
 3. Write the RAN number on the outside of the shipping box.
 4. Send the pump with the above information to:

Medela, Inc.
1101 Corporate Drive
McHenry, IL 60050

- C. Notify the state breastfeeding coordinator or her designee if it has been determined that the pump cannot or should not be repaired.
 - 1. Complete Report of Lost, Stolen, or Damaged Breast Pumps form and send it to the state WIC office.
 - 2. Contact the state WIC office for further guidance on disposing damaged breast pumps.

Information:

Depending on the age of the multi-use pump and the damage, it may not be worth the cost to repair the pump. Staff can call Medela's customer service department for guidance at 1-800-435-8316, extension 284.

POLICY: Washington State Breastfeeding Peer Counselor Program

Local agencies shall have the option to establish a “Loving Support” breastfeeding peer counselor program. Local agencies establishing this program shall follow the policies and procedures outlined in this chapter.

Local agencies interested in establishing a “Loving Support” breastfeeding peer counselor program shall receive training on managing the program prior to implementation.

Note: The definition of a breastfeeding peer counselor is a woman from the community with a positive personal breastfeeding experience who models and provides breastfeeding information and support for other mothers. Breastfeeding peer counselors fill the gap in services after hospital discharge to achieve seamless continuity of breastfeeding support.

Research has indicated that combining peer counseling with ongoing breastfeeding promotion efforts has the potential to significantly increase initiation and duration of breastfeeding among WIC clients. USDA’s Food and Nutrition Service’s long-range vision is to institutionalize peer counseling as a core service in WIC.

PROCEDURE:

The Local WIC Coordinator or designated staff:

- A. Notify the State Breastfeeding Peer Counselor Coordinator of interest to establish a breastfeeding peer counseling program.
- B. Work with the State Breastfeeding Peer Counselor Coordinator to schedule training on program management.
- C. Provide the State Breastfeeding Peer Counselor Coordinator copies of required local agency policy, procedures, job descriptions and other program information.
- D. Determine the number of peer counselors needed.
- E. Complete the “WIC Breastfeeding Peer Counseling Program Budget Form” in Appendix B of this chapter and send to the State Breastfeeding Peer Counselor Coordinator.

Note: The number of peer counseling programs may be limited due to funding. If funds for this program are limited, the State WIC Nutrition Program shall use an application process developed with local agency input, to determine which agencies will be authorized to establish the program.

POLICY: Parameters of Breastfeeding Peer Counselor Activities

Prior to initiating a “Loving Support” breastfeeding peer counseling program, local agencies shall develop a written job description defining the scope of practice for the peer counselors.

Best practice includes allowing peer counselors currently breastfeeding to have their young infants with them while providing peer counseling services at the agency.

PROCEDURE:

The Local WIC Coordinator or designated staff:

- A. Develops a job description for the peer counselor that describes:
 - 1. Where peer counselors provide services.
 - 2. Expectations on the frequency of prenatal and post-partum client contacts.
 - 3. The hours peer counselors shall be available to clients.
 - 4. How peer counselors document client contacts.
 - 5. How peer counselors receive and make referrals.

Note: Refer to the sample WIC Breastfeeding Peer Counselor job description in Appendix B of this chapter.

POLICY: Selecting Breastfeeding Peer Counselors

Local agencies shall use set criteria when selecting breastfeeding peer counselors and work with the State Breastfeeding Peer Counseling Coordinator to determine program goals and peer counselor staffing needs.

PROCEDURE:

The Local WIC Coordinator or designated staff:

- A. Selects breastfeeding peer counselors based upon the following criteria:
 - 1. Previous or current positive breastfeeding experience of at least six months.
 - 2. Previous or current WIC client experience.
 - 3. Selected from the community where clients live.
 - 4. Work history does not include extensive professional training (paraprofessional background).
 - 5. A schedule that allows WIC clients to contact the peer counselor outside usual clinic hours and outside the WIC clinic environment.
 - 6. An enthusiasm for breastfeeding.
- B. Considers additional criteria which includes, but is not limited to: basic communication skills, similarities with the WIC population served, including ethnic background, age, and language spoken.

POLICY: Training of Breastfeeding Peer Counselors

Local agencies shall have policies that describe the minimum training requirements that breastfeeding peer counselors receive before starting peer support activities. At a minimum, peer counselors shall receive training using the “Loving Support through Peer Counseling” curriculum.

Peer counselors shall be offered a minimum of one scheduled breastfeeding training each year.

Local agencies shall have the option to increase the training requirements.

POLICY: Compensation and Reimbursement of Breastfeeding Peer Counselors

Local agencies establishing a “Loving Support” breastfeeding peer counseling program shall offer peer counselors, at a minimum, the prevailing minimum wage and be reimbursed for expenses related to job duties that include, but are not limited to: mileage, long distance phone calls, answering machine cost, training registrations and any other expense required to meet the expectations of their job duties.

Local agencies have the option to hire the peer counselors as employees, hire the peer counselors as independent contractors, or contract with a third party to hire and manage the peer counselors.

Local agencies shall be allowed to utilize existing paraprofessional staff as breastfeeding peer counselors **only** if these staff meet the definition and selection criteria of peer counselor and as outlined in this policy **and** this arrangement provides breastfeeding services beyond current operations.

Contracted peer counselors shall sign an agency-approved contract and confidentiality statement. If the local agency uses a third party to hire and manage the peer counselors, a contract or a Memorandum of Understanding (MOU) shall be in place prior to the start of the program.

Peer counselors shall have the option to volunteer their services in lieu of payment.

Local agencies shall have the option to send draft contracts or (MOU's) to the State Breastfeeding Peer Counselor Coordinator for review.

PROCEDURE:

The Local WIC Coordinator or designated staff:

- A. Determines whether to hire the peer counselor as an employee or as a contractor.
- B. For third party contracts:
 - 1. Develops an agency-approved contract and confidentiality statement for contracted peer counselors.
 - 2. Uses an agency-approved contract that specifies the scope of responsibilities for both the agency and the contractor, for third party contracts.
 - 3. Keeps copies of all signed contracts and statements following the agency personnel/contract protocols.

Note Refer to the sample WIC Breastfeeding Peer Counselor Contract Confidentiality Statement in Appendix B of this chapter.

POLICY: Credentials and Training Requirements for the Local Breastfeeding Peer Counselor Supervisor

Prior to starting a “Loving Support” breastfeeding peer counselor program, the local breastfeeding promotion coordinator or designee shall have the credentials of an International Board Certified Lactation Consultant (IBCLC) or have completed other state approved certification in lactation management course work within the last five years.

The individual responsible for managing breastfeeding peer counselors shall, at a minimum, participate in annual breastfeeding education.

POLICY: Supervision of Breastfeeding Peer Counselors

The local agency breastfeeding promotion coordinator or designee shall oversee day-to-day supervision of breastfeeding peer counselors and develop protocols for peer counselor activities.

The protocols shall be developed with the assistance of the State Breastfeeding Peer Counselor Coordinator.

PROCEDURE:

- A. The breastfeeding peer counselor supervisor develops protocols that at a minimum include:
1. Recruitment and interview procedures that are in alignment with WIC Nutrition Program and local policies and standards.
 2. How often peer counselors receive training.
 3. How often the supervisor meets with the peers, during the first six months of peer counselor employment and afterwards, for on-going contacts.
 4. How follow-up and guidance is provided in the early days of the job.
 5. How client contact documentation by peer counselors is monitored.
 6. How the breastfeeding peer counselor receives and makes referrals.
 7. How the program quality is monitored, including conducting spot checks of client contacts by peers.
 8. The degree to which peer counselors participate in staff meetings and clinic breastfeeding in-services.
 9. Conditions for terminating a peer counselor such as, not performing job duties, fraud, inappropriate conduct for a “role model” in the community, not adhering to the signed contract and confidentiality statement.

Note: Refer to the sample forms in Appendix B of this chapter: “Sample Referral to Breastfeeding Peer Counselor” and “Sample Peer Counselor Client Contact Log”.

POLICY: Allowable Costs for the “Loving Support” Breastfeeding Peer Counseling Program

Agencies participating in the “Loving Support” Breastfeeding Peer Counseling Program shall use program funds for allowable costs.

Staff who act as breastfeeding peer counselors or peer counselor supervisors or administrators in the “Loving Support” Breastfeeding Peer Counseling Program shall do daily time keeping to assure WIC and “Loving Support” activities are billed separately.

PROCEDURE:

- A. Staff request reimbursement by reporting costs incurred in administering the “Loving Support” program as a separate line item when submitting their A-19’s to the state WIC office. “Loving Support” Breastfeeding Peer Counseling Program allowable costs include:
1. **Staff salary and fringe benefits:** Appropriate portions of salaries and fringe benefits of WIC staff providing supervision to peer counselors.
 2. **Salary and fringe benefits for peer counselors:** Appropriate portions of salaries and fringe benefits of peer counselors.
 3. **Supplies:** Expenses for items such as notebooks for peer counselors to document contacts, demonstration and/or teaching aids, files, communication aides such as answering machines, and office supplies to be used for the program.

Note: Breastfeeding resources for the peer counselor coordinator/supervisor can be purchased with this funding *only* if the resources are related to peer counseling, e.g., training manuals for peer counselors. Otherwise, breastfeeding resources for peer counselor supervisors and other WIC staff should be paid for through regular WIC breastfeeding funds.
 4. **Travel:** Expenses for peers to visit clients, attend conferences and/or breastfeeding trainings. Expenses for administrator costs associated with attending training and/or meetings related to the “Loving Support” program.
 5. **Training:** Expenses associated with training peer counselors.

Note: The research recommends that peer counselors be provided career path options (e.g., training/experience to become senior level peer counselors; advanced training to become lactation consultants, etc.); therefore, the funds can be used to train peer counselors to become International Board Certified Lactation Consultants (IBCLC’s). However, the priority use of these funds is to hire and train peer counselors to provide breastfeeding

peer counseling services to WIC participants. It is not expected to see excessive program costs used to train peers to become IBCLCs.

6. **Promotional materials:** Expenses associated with producing and distributing handouts to educate WIC participants about the peer counseling program or costs used to purchase shirts that identify staff as peer counselors. However, educational materials to promote breastfeeding are to be paid out of state or local breastfeeding funds. These funds are primarily to be used to provide breastfeeding support services through peer counseling to WIC participants, not simply to purchase items and materials.
 7. **Indirect Costs:** Refer to Volume 2, Chapter 2 – Contracting for more information.
- B. Costs that are unallowable for the “Loving Support” Breastfeeding Peer Counseling Program include:
1. **Childcare:** Costs associated with providing childcare while the peer counselor is in training or providing services to WIC clients.
 2. **Discharge bags:** The intent of the funds is to enhance WIC breastfeeding support services to WIC participants through peer counseling, not to distribute items and materials to WIC participants. The peer counselor can distribute such items, but the funds cannot be used to develop and distribute materials.
 3. **Other unallowable costs:** Refer to Volume 2, Chapter 12 – Expenditure Report for further information on unallowable costs.

POLICY: Coordination of “Loving Support” Breastfeeding Peer Counseling with other Breastfeeding Activities

An annual report and review of breastfeeding peer counseling activities shall be included in the annual nutrition education plan.

PROCEDURE:

Clinic staff:

- A. Submit a report with the annual nutrition education plan that includes:
 - 1. The number of active peer counselors during the year.
 - 2. The attrition rate of peer counselors.
 - 3. The average number of client contacts per peer counselor.
 - 4. A review of breastfeeding rates for the agency prior to and after initiating a peer counselor program.
 - 5. The type and amount of training offered to peer counselors during the year.
 - 6. Coordination activities with other breastfeeding support organizations and /or programs such as MSS, BEFNEP, La Leche League, local breastfeeding coalitions, hospital lactation consultants, etc.
 - 7. A review of the over-all value of the program.

Appendix A

Examples of Appropriate Roles Related to Promoting and Supporting Breastfeeding

Federal regulations require local agencies to incorporate task-appropriate breastfeeding promotion and support training into orientation programs for new staff involved in direct contact with WIC clients.

Although clinic-staffing patterns vary and job descriptions are always changing, there are five defined staff roles in WIC. Below are examples of task-appropriate roles and responsibilities for WIC Clerks/Front-line staff, Competent Professional Authorities (CPAs), nutritionists, Breastfeeding Promotion Coordinators and coordinators.

Breastfeeding is well supported in the WIC program when all staff, including front-line staff, have the following basic skills and training.

Basic skills and training for all WIC staff

- Know why WIC promotes and supports breastfeeding as the normal method of infant feeding.
- Know the benefits of breastfeeding.
- Understand the basics of normal breastfeeding.
- Promote breastfeeding to all pregnant clients at every WIC visit.
- Ask breastfeeding clients how breastfeeding is going at every WIC visit.
- Enlist the help of a CPA for clients who have questions or problems with breastfeeding.
- Not issue formula to a fully breastfeeding infant without referring client to a CPA for a Breastfeeding Review.
- Understand the negative impact introducing formula has on breast milk production.
- Have the skills to identify “red flags” for breastfeeding and provide appropriate referrals.
- Provide updated breastfeeding resources to pregnant and breastfeeding clients.
- Have skills to provide positive encouragement to breastfeeding clients.
- Know the few circumstances in which a woman should not breastfeed.
- Are oriented to and carry out local agency breastfeeding promotion and pump distribution policies.
- Participate in activities to complete the breastfeeding portion of the Local Agency Annual Nutrition Education Plan.
- Participate in breastfeeding training and in-services for staff.

Examples of appropriate roles related to promoting and supporting breastfeeding

Clerks

In general, duties for clerks may include gathering demographic and income information before the applicant sees the CPA, answering phones, scheduling clients, issuing WIC checks, providing check education, providing referrals, and maintaining clinic flow. Clerks play a critical role in breastfeeding promotional and support because they are the first point of contact for clients and

see them most often. Therefore, it is important for clerks to have the basic skills and training to promote and support breastfeeding.

WIC Certifier/CPA

The CPA interviews the client to determine if a medical or non-medical risk qualifies the client for the program. It is her/his responsibility to ensure the client meets all eligibility requirements, to prescribe the food package, determine the type of appointment needed to follow the certification or recertification, and provide any needed referrals.

Within the context of CPA duties, breastfeeding will be promoted and supported when staff in these positions have the Basic Skills and Training and in addition:

- Uses client-centered approach to educate pregnant women on how to successfully initiate and sustain full breastfeeding..
- Has skills to help breastfeeding clients problem solve common breastfeeding concerns.
- Has skills to complete Breastfeeding Review prior to issuing formula to a breastfeeding infant.
- Has additional training to provide more in-depth breastfeeding support to clients with special concerns.

Registered Dietitian or WIC nutritionist

The nutritionist provides high-risk nutrition counseling, develops high-risk care plans, and participates in the development of the Local Agency Annual Nutrition Education Plan. Staff in this position may also provide certification services as a CPA, Coordinator and/or Breastfeeding Promotion Coordinator.

Within the context of nutritionist duties, breastfeeding will be promoted and supported when staff in these positions have the basic skills and training and in addition:

- Has skills to meet the responsibilities as a CPA, clinic coordinator and/or Breastfeeding Promotion Coordinator as needed.
- Has additional training to provide more in-depth breastfeeding support to clients with special concerns.
- Assists in developing local agency breastfeeding promotion and support policies.
- Assists in the developing protocols for triaging clients with breastfeeding concerns.
- Participates in or conducts breastfeeding education in-services for staff.
- Coordinates breastfeeding support services with Maternity Support Services and other health care organizations and providers.
- Participates in the development, review or selection of breastfeeding education materials.
- Accurately interprets the Breastfeeding Report and share the clinic's breastfeeding initiation and duration data.
- Works with the Breastfeeding Promotion Coordinator to develop the breastfeeding objectives and activities for the Local Agency Annual Nutrition Education Plan.

- Is familiar with breastfeeding resources such as books, professional internet sites and journals, and other sources of breastfeeding education and shares them with staff.

Breastfeeding Promotion Coordinator

The Breastfeeding Promotion Coordinator serves as the point-of-contact for the State WIC Breastfeeding Promotion Coordinator, coordinates breastfeeding activities within the clinic and with other organizations, and participates in the development of the Local Agency Annual Nutrition Education Plan. Staff in this position may also provide certification services as a CPA, clinic coordinator and/or nutritionist.

Within the context of Breastfeeding Promotion Coordinator duties, breastfeeding will be promoted and supported when staff in these positions have the Basic Skills and Training and in addition:

- Has skills to meet the responsibilities as a CPA, clinic coordinator and/or nutritionist as needed.
- Coordinates activities in the clinic to promote breastfeeding. Assesses the “look” and “feel” of the clinic to reflect breastfeeding as the normal way to feed infants.
- Has additional training to provide more in-depth breastfeeding support to clients with special concerns.
- Keeps local community breastfeeding resources updated.
- Coordinates World Breastfeeding Week activities.
- Participates in or conducts breastfeeding education in-services for staff.
- Coordinates breastfeeding promotion and support activities with other agency programs, organizations and community partners to provide consistent information and support to breastfeeding women.
- Accurately interprets the Breastfeeding Report and share the clinic’s breastfeeding initiation and duration data with staff.
- Presents the breastfeeding objectives and activities from the Local Agency Annual Nutrition Education Plan to staff.
- Is familiar with breastfeeding resources such as books, professional internet sites and journals, and other sources of breastfeeding education and shares them with staff.
- Works with coordinator to prioritize use of local agency breastfeeding funds.

Clinic Coordinator

The clinic coordinator has a variety of duties. Depending on the clinic, the clinic coordinator may or may not provide direct client services. The clinic coordinator manages the WIC contract with the State Office, manages clinic caseload, supervises clinic staff and assures the local program meets the policies spelled out in the Washington State WIC Manual.

Within the context of clinic coordinator duties, breastfeeding will be promoted and supported when staff in these positions have the Basic Skills and Training and, in addition:

- Has skills to meet the responsibilities as a CPA, nutritionist, and/or Breastfeeding Promotion Coordinator as needed.
- Assures local agency policies are developed and carried out to meet all breastfeeding requirements in the Washington State WIC Manual.
- Designates a staff person(s) to carry out the role of Local Agency Breastfeeding Promotion Coordinator.
- Assures that the Breastfeeding Promotion Coordinator receives additional training in breastfeeding promotion and support annually and attends state-sponsored scheduled Breastfeeding Promotion Coordinator meetings.
- Provides time for the Breastfeeding Promotion Coordinator to carry out coordination duties outlined in this chapter.
- Assures all staff receives task-appropriate breastfeeding orientation.
- Assures all staff receives on-going breastfeeding training.
- Assures CPAs provide all breastfeeding clients with a complete Breastfeeding Review prior to issuing formula.
- Assures all staff know how to correctly enter breastfeeding information into the infant's record in Client Services and update those fields as needed.
- Assures coordination with other agency programs, organizations and providers to assure that accurate and consistent breastfeeding information and support is provided to clients.
- Works with the Breastfeeding Promotion Coordinator to prioritize use of local agency breastfeeding funds.
- Supports staff to carry out World Breastfeeding Week activities (August 1-7).

Breast Pump Release of Liability Form

Equipment Received: ☐ Manual pump ☐ Personal use pump ☐ Multi-user pump ☐ Electric pump attachment kit

Staff to mark (✓):

Yes	No	Information provided to WIC client
		How to put the pump together
		How the pump works
		How to clean the pump
		How to use the pump
		Safely storing breast milk
		How to hand express breast milk
		How to get help

Multi-user pump Serial # _____

Client to return multi-user pump by (date): _____

WIC client to read and mark (✓) for Yes

	I have been given all of the information staff marked above.
	I fully understand how to use the pump properly.
	I understand this pump is for my use only. I will not give or sell this pump to anyone else to use.
	I agree not to bring any financial or personal liability claim against the WA State WIC Program, its contractors or local agencies, or any official or employee connected with the WIC Program, for any damages, expenses, or personal harm arising from the use of this pump.
	(Multi-user pump only) I agree to return this pump in clean and working condition by _____ (date).
	(Multi-user pump only) I understand this pump is loaned to me on a priority basis. I could be asked to return it early so a WIC client in greater need may use it.
	(Multi-user pump only) I understand this pump is the property of the WIC program. If I do not return it, collection proceedings will be filed and I will be asked to pay the WIC program the value of the unreturned breast pump.
	I will call the WIC staff at _____ (number) if I have any concerns or questions about the use of this pump or breastfeeding.
	I have read and fully understand this form, and I understand I will receive a copy of it.

Client Signature/Date:

Staff Signature/Date:

Client Contact Information:

Mailing Address/Phone Numbers: work, cell, home

WIC Client ID# _____

Alternate Contact (WIC will contact if you can't be reached):

Name/Address/Phone Number:

Tell WIC if your address or telephone number changes

Washington WIC does not discriminate.

SAMPLE: “Dear Breastfeeding Mom” Letter

Agency Letterhead

Dear Breastfeeding Mom,

Congratulations on doing the best for your baby by choosing to breastfeed! Please contact us if you have any questions or concerns about using this breast pump.

If you were loaned an electric Lactina breast pump, please return this pump on time so another mother can borrow it, and another baby will be helped. Please call us if you would like to ask about using the pump for a longer period of time.

Thank you for your cooperation, and for being a great mom!

Sincerely,

Your WIC staff
Agency/Clinic
Contact Phone Number

SAMPLE: Over Due Breast Pump Letter

Agency Letterhead

Dear Breastfeeding Mom,

We are so glad that you are breastfeeding your baby. Our records show that you were issued an electric breast pump from the _____ WIC Clinic.

That pump was due_____.

Please contact us about returning the breast pump as soon as possible or to ask about using the pump for a longer period of time. By returning this pump another mother can borrow it and another baby will be helped.

Thank you for your cooperation, and for being a great mom!

Sincerely,

Your WIC staff
Agency/Clinic
Contact Phone Number

Assessing the Effectiveness of Breast Pumps

The effectiveness of the suction of a breast pump is measured in a pressure reading of MMHG. It is not important to understand this measurement to test the power of a breast pump. Electric and manual pumps can be evaluated by measuring pressure using a gauge that can be ordered from Medela. Local agency breastfeeding funds can be used to purchase a pressure gauge, if desired. Staff can call Medela's customer service department at 1-800-435-8316 for more information on ordering pressure gauges or other spare parts. Multi-use pumps (Lactinas) can also be evaluated for power (suction) without a pressure gauge by following the steps below.

1. Take the pump out of the case and set it on a table.
2. Plug the pump in and turn it on.
3. Carefully grab the "arm" of the pump and hold on tight. Be careful not to pinch your fingers!
4. If the pump can buck up and down it can pump breast milk effectively.

To check the power of an electric pump by using a pressure gauge:

1. For multi-user pumps, attach the yellow pump connector and piston into the breast pump. Make sure that the tab of the connector is inside the blue lip of the pump. For personal-use pumps skip to number 2.
2. Insert tubing as if only pumping one breast.
3. Securely attach a single bottle and all parts (breast shield, membrane, and valve) to the tubing.
4. Firmly press the white cover into the hole on the yellow pump connector, or for personal use pumps, on the pump face plate. Make sure the hole is completely plugged.
5. Insert the pump gauge firmly into the breast shield and turn on the pump.
6. Read the pressure on the gauge. Pumps working properly will have readings in these ranges.
 - a. Lactina 100-240 MMHG
 - b. Pump 'n Style (WIC 'n Style) 50-250 MMHG

Pressure ranges for other Medela pumps can be found on their website at <http://www.medelabreastfeedingus.com/> Find the pump you are looking for and click on specifications for the optimal level of pressure, or suction as measured by a pressure gauge.



REPORT OF LOST, STOLEN, OR DAMAGED MULTI-USER ELECTRIC BREAST PUMPS

1. REPORT FILED BY:

Staff Name _____ Phone () _____

Clinic Name and Address _____

E-mail Address _____

2. BREAST PUMP (SERIAL NUMBER _____) HAS BEEN:

☐ Lost

☐ Stolen

☐ Damaged

3. DESCRIBE EVENTS LEADING TO LOSS, THEFT, OR DAMAGE OF PUMP:

☐ Description documentation attached

☐ Police report filed (attach copy)

4. FOR LOST OR STOLEN PUMPS ONLY: *(Attach copies of documentation)*

Date of Pump Loan _____ Date Pump to Be Returned _____

☐ Release form signed (attach copy)

Pump was loaned to (Name): _____

Client ID # _____ DOB: _____

Names of group members (include DOB) _____

Last known address: _____

Alternate contact information: _____

Description of recovery attempts *(attach copies of documentation)*

Return completed form to:

Gwendelyn Marshall, DOH WIC Program, PO Box 47886, Olympia, WA 98504. Fax (360) 236-2320

Email: Gwendelyn.Marshall@doh.wa.gov

SAMPLE: Inventory Form for Multi-user Electric Breast Pumps

Instructions: Track the status of electric breast pumps used in your breast pump loan program. Routinely check the inventory of breast pumps and determine the need for follow up.

Modify this sample inventory form to best meet your clinics' tracking and inventory needs.

[illegible]

SAMPLE: Perpetual Inventory Form for Personal Use Breast Pumps

Instructions: Track the inventory of electric personal use breast pumps at least twice a year.

Modify this sample inventory form to best meet your clinic's tracking and inventory needs.

[illegible]

Appendix B

USING *Loving Support*[®] TO MANAGE
PEER COUNSELING
P R O G R A M S

WIC Breastfeeding Peer Counseling Program Budget Form

Staff Salaries

Peer Counselor Supervisor(s) \$ _____

Peer Counselor Salaries \$ _____
(Hourly pay + FICA x # hours/week x 52 weeks x # of peer counselors)

Program Expenses

Mileage Reimbursement \$ _____
(# Miles anticipated per week x State reimbursement rate x
52 weeks x # of peer counselors)

Communication \$ _____
(Telephone long distance reimbursements, beepers, answering machines)

Office Supplies \$ _____
(Notebooks and dividers, tickler files and cards, file box,
office supplies, postcards, envelopes, stationary)

Demonstration Materials \$ _____
(Breast pump, demonstration dolls and models, videos, etc.)

Program Forms \$ _____
(Contact logs, weekly time reports, referral forms)

Training Expenses

Costs associated with designated staff attending "Using Loving
Support to Manage Peer Counseling Programs". \$ _____

Costs associated with conducting "Loving Support through
Peer Counseling" training to peers.

Training Materials \$ _____
(Peer counselor training guide, educational materials, and resources)

Graduation Certificates \$ _____

Conference Workshops \$ _____

Educational Materials

Professional Resources for Peer Counselors \$ _____

Total \$ _____

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Sample Job Description for a WIC Breastfeeding Peer Counselor

Title: WIC BREASTFEEDING PEER COUNSELOR

General Description:

A WIC Breastfeeding Peer Counselor is a paraprofessional support person who gives basic breastfeeding information and encouragement to WIC pregnant and breastfeeding women.

Qualifications:

- Has breastfed at least one baby (does not have to be currently breastfeeding).
- Is enthusiastic about breastfeeding, and wants to help other mothers enjoy a positive experience.
- Can work about 10 hours a week.
- Has a telephone, and is willing to make phone calls from home.
- Has reliable transportation.
- Current or previous WIC client experience.
- High school diploma preferred.

Training

- Attends a series of breastfeeding classes.
- Observes other peer counselors or lactation consultants helping mothers breastfeed.
- Reads assigned books or materials about breastfeeding.
- Attends on-going training as determined by supervisor.

Supervision:

The peer counselor is supervised by the clinic Breastfeeding Promotion Coordinator or designee or third party contractor.

Specific Duties:

The WIC Peer Counselor:

1. Attends breastfeeding training classes to become a peer counselor.
2. Counsels WIC pregnant and breastfeeding mothers by telephone, home visits, and/or hospital visits at scheduled intervals determined by the local WIC program.
3. May counsel women in the WIC clinic.
4. Receives a caseload of WIC clients and makes routine periodic contacts with all clients assigned.
5. Gives basic breastfeeding information and support to pregnant women and new mothers, including telling them about the benefits of breastfeeding, overcoming

- common barriers, and getting a good start with breastfeeding. She also helps mothers prevent and handle common breastfeeding concerns.
6. Is available outside usual 8 to 5 working hours to new mothers who are having breastfeeding problems.
 7. Respects each client by keeping her information strictly confidential.
 8. Keeps accurate records of all contacts made with WIC clients, mileage, and any other records identified by the supervisory staff.
 9. Refers mothers, according to clinic-established protocols, to the:
 - WIC nutritionist or breastfeeding coordinator.
 - Lactation consultant.
 - The mother's physician or nurse.
 - Public health programs in the community.
 - Social service agencies.
 10. Attends and assists with prenatal classes and breastfeeding support groups.
 11. Attends monthly staff meetings and breastfeeding conferences/workshops as appropriate.
 12. Reads assigned books and materials on breastfeeding that are provided by the supervisor.
 13. May assist WIC staff in promoting breastfeeding peer counseling through special projects and duties as assigned.

I understand the above job responsibilities, and agree to perform these duties as assigned.

WIC Breastfeeding Peer Counselor

Date

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PEER COUNSELING
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Sample WIC Breastfeeding Peer Counselor Contract

This agreement made between _____
(name and address of sponsoring agency)

and _____ witnesses that:
(name of WIC peer counselor)

Services

The contractor will serve as a breastfeeding peer counselor to clients of the _____
_____ Special Supplemental Nutrition Program for Women, Infants and Children
(WIC) for the period of _____ to _____ unless this contract is
cancelled.

Compensation

The peer counselor agrees to perform services as stated in the job description. The peer
counselor will be paid at the rate of \$_____ per hour, including travel time, for a
maximum of _____ hours per month. In addition, reimbursements shall be
made at the rate of \$_____ per mile according to the guidelines for mileage
reimbursement by the State. Time sheets for payment will be turned in by the _____
day of the month to the WIC supervisor, and payment will be on a contractual basis on
the _____ day of the month following the month services were completed.

The peer counselor agrees to identify and hold harmless _____
(sponsoring agency name)
from and against any claim or liability arising from negligent act or omission of the peer
counselor. Should the peer counselor fail to perform satisfactorily, _____
(sponsoring agency)
may terminate this agreement within _____ days notice to the peer counselor.

It is further agreed by both parties hereto that in performing under this agreement, the peer counselor is an independent contractor and that nothing herein shall be construed as establishing an employer/employee relationship. The peer counselor agrees to treat all information acquired on the job as confidential in nature.

Approved by:

Approved by:

WIC Coordinator

Breastfeeding Peer Counselor

Date

Date

Sample Confidentiality Statement

Handling of WIC Participant Information

Trust and confidence are needed for a successful program. This trust must be on all levels: between supervisors and peer counselors, between peer counselors and colleagues, and between peer counselors and clients.

Clients share personal information in order to be served as WIC clients. This includes medical, financial, and personal information. At the same time, clients have the right to know that the information they give will be kept confidential and used only as needed by clinic staff. It is our responsibility to respect their privacy and not discuss client information.

Discussing confidential information to anyone outside the WIC clinic is prohibited except when it may be needed to provide services to a client. This includes ensuring that client records and materials in your possession are not able to be viewed by anyone other than authorized WIC program employees either by access to files, or by observation due to careless record management.

AGREEMENT

I have carefully read the above Confidentiality Agreement and understand the confidential nature of all client information and records. I understand that it is my job to share client information *only* with staff involved in the case, and understand that I am prohibited by law from disclosing any such confidential information to any individuals other than authorized WIC Program employees and agencies with which the participant has given written permission to share information. I understand that any willful and knowing disclosure of confidential information to unauthorized persons is in violation of the law and subject to possible legal penalty and termination of employment.

Name (*please print*)

Signature

Date

Witness

Date

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PEER COUNSELING
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Sample Referral to Breastfeeding Peer Counselor

Name of Client: _____

Baby's Name (if appropriate): _____

Address: _____

Phone: () _____ Age: _____

Email: _____

Due Date or Baby's DOB: _____

Sex of baby: _____ Male _____ Female

_____ Client is interested in receiving breastfeeding information.

_____ Client is currently breastfeeding.

_____ Client needs follow-up help with breastfeeding.

Explain: _____

_____ Other: _____

Additional comments:

Referred by: _____ Date: _____

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P R O G R A M S

Sample Referral from a Breastfeeding Peer Counselor

Name of Client: _____

Address: _____

Phone: () _____ Age: _____

Email: _____

Due Date or Baby's DOB: _____

_____ Client needs follow-up help for the following breastfeeding issue:

_____ Client referred to the following services/staff:

- ☐ WIC staff
- ☐ MSS
- ☐ Medicaid
- ☐ TANF
- ☐ Other: _____

Referred by: _____ Date: _____

Sample Peer Counselor Client Contact Log

Mother's name: _____ Mother's DOB: _____

Address: _____ City: _____

State: _____ Zip: _____ Breastfed ever? _____ Due date: ____/____/____

Baby's date of birth: ____/____/____ Baby's name: _____

Baby's birth wt. _____ Discharge wt. _____ Two week wt. _____

Type of contact: 1=phone 2=home visit 3=group class 4=mail 5=clinic visit 6=hospital visit 7=other

Prenatal Contacts

[illegible]

Type of contact: 1=phone 2=home visit 3=group class 4=mail 5=clinic visit 6=hospital visit 7=other

Postpartum Contacts

[illegible]

